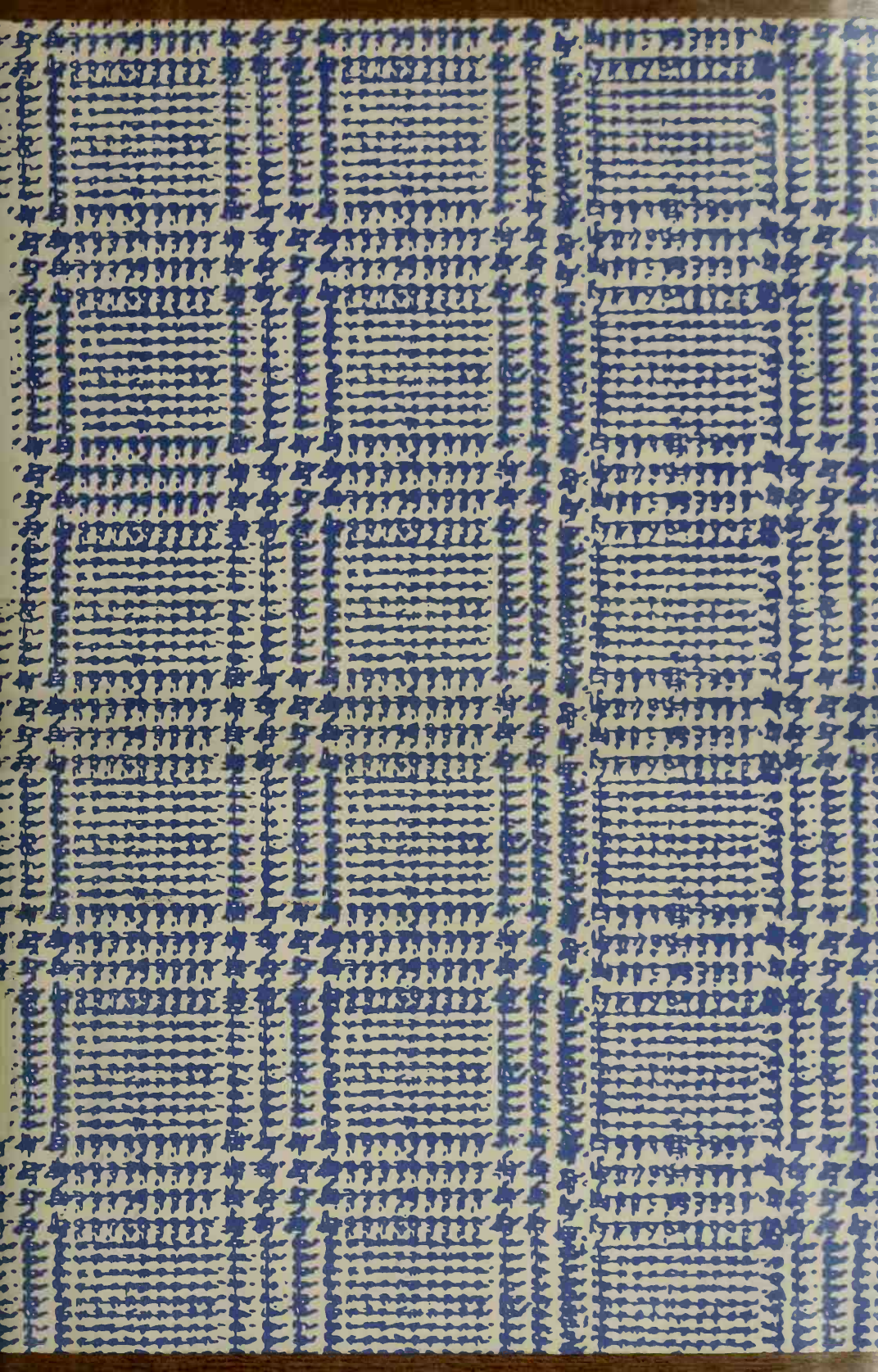

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THE NEWS LETTER

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Number 51 NEW YORK, N. Y. April, 1925

TRAINING COURSES FOR TEACHERS AND SUPERVISORS OF SIGHT SAVING CLASSES

The new school term opened in February with 207 sight saving classes, a gain of 26 over the previous year. If the proportion already found of the number of children requiring the advantages of these classes holds, there is need for 5,000 sight saving classes in the United States. There are many obstacles to the establishment of these classes—one of the chief of these is the lack of trained teachers.

To meet this need two series of summer courses will be given in 1925: one by Peabody College, Nashville, Tenn., opening June 8th; the other by the University of Cincinnati, Cincinnati, Ohio, opening June 22d. These courses offer lectures, observation in a demonstration class, and clinical work. Each series will last for six weeks. If the required schedules are carried out, five college credits will be given; in the Cincinnati series graduate credits will be given for the lecture and clinical courses on completion of specially assigned work.

In cases where schools do not close until the end of June, special arrangements have been made with the University of Cincinnati by which late registration of one week will be accepted and full credit given provided the work is satisfactorily made up.

Announcements of these courses have been sent out. Any further particulars desired may be obtained from the respective colleges or from the National Committee for the Prevention of Blindness, 130 East 22d Street, New York.

ANNOUNCEMENT OF A NEW BULLETIN

A very brief bulletin, Lighting the Schoolroom, based on the Code of Lighting School Buildings, has been prepared by a Sub-

committee of the Sectional Committee on School Lighting. This bulletin has been printed by permission, by the National Committee for the Prevention of Blindness. A very large edition has been issued and is being distributed to teachers. Anyone desiring copies may obtain them by addressing the National Committee for the Prevention of Blindness, 130 East 22d Street, New York.

TRIBUTES TO MISS SCHUYLER AND MRS. RICE

At the dinner held in connection with the fifty-third Annual Meeting of the State Charities Aid Association, Mrs. James Russel Parsons, a member of the Board of Managers, paid a tribute to Miss Louisa Lee Schuyler, founder of the Committee for the Prevention of Blindness, and Mrs. William B. Rice, her close associate. After citing some of their activities Mrs. Parsons said: "I want to take one moment to emphasize the fact that the record of service of Miss Schuyler and Mrs. Rice forms a conspicuous demonstration of the possibilities of public usefulness in the life of a private citizen. Miss Schuyler and her co-workers, by reason of their common sense, practical sympathy and dauntless courage, were able to carry their influence into the Albany Legislature; through their success in bettering conditions throughout New York State, they set an example and an inspiration to the entire nation."

The National Committee for the Prevention of Blindness numbers 146 ophthalmologists and 233 other physicians among its active members.

DECREASE IN BLINDNESS FROM OPHTHALMIA NEONATORUM (BABIES' SORE EYES)

The National Committee for the Prevention of Blindness has statistics which go back to 1907–8, which show the percentage of pupils blind from ophthalmia neonatorum admitted for the first time to schools for the blind and to classes for the blind in public school districts.

It is apparent that there has been approximately 50 per cent. decrease in the amount of blindness among pupils from ophthalmia neonatorum. The figures in the table cover seventeen years, and for the purposes of comparison may be divided into three groups of six- and five-year periods respectively.

School Year	Number of Schools and Districts Maintaining Day Classes	Total New Admissions	Pupils Blind from O. N.	Percent
1907– 8	10	290	77	26.6
1908– 9	14	300	68	22.7
1909–10	13	325	67	20.6
1910–11	15	351	84	23.9
1911–12	24	415	88	21.2
1912–13	21	386	88	22.8
1913–14	19	428	84	19.6
1914–15	28	602	91	15.1
1915–16	35	666	127	19.1
1916–17	34	647	119	18.4
1917–18	40	614	90	14.7
1918–19	44	621	105	16.9
1919–20	47	749	174	23.2
1920–21	39	702	95	13.5
1921–22	42	760	108	14.2
1922–23	48	738	97	13.1
1923–24	49	712	91	12.7

During the first six years covered by the table the average number of schools reporting is sixteen; the total new admissions were 2,067; pupils blind from ophthalmia neonatorum, 472, a percentage of 22.8.

During the second six-year period an average of 33 schools reported 3,578 new admissions, with 616 blind from ophthalmia neonatorum, a percentage of 17.2.

During the five-year period, 1919–24, an average of 45 schools reported 3,661 new admissions with 565 blind from ophthalmia neonatorum, or 15.6 percent.

This last percentage is not particularly reassuring, since it shows less than 2 percent. reduction from the six-year period, 1913–19. In considering this last percentage, however, the abnormal year of 1919–20 should be taken into especial account where a percentage of 23.2 was given. It is probable that the last four years, 1920–24, with 13.4 percent., come much nearer the actual percentages of pupils who are now entering schools for the blind who suffer from ophthalmia neonatorum.

The campaign for the elimination of ophthalmia neonatorum as a specific cause for blindness was not reflected in the statistics until comparatively recently. The reason for this is obvious. If in any given year there is a reduction in the amount of ophthalmia neonatorum, it will be eight or ten years after that before the children born in that year enter schools for the blind. The average age entering schools for the blind is higher than that of day schools. No figures are available in this office as to this age, but assuming it to be ten years, the children entering schools for the first time in 1923–24 were born in 1913, or 14 at the time when work of the National Committee for the Prevention of Blindness was first receiving nation-wide attention.

It is questionable whether the statistics presented do much more than show tendencies. It will probably be advisable to differentiate as to the figures which are accepted for inclusion in any table, and no reports except those made by ophthalmologists should be admitted.

Indiana

The Bureau of Publicity of the Indiana State Medical Association is issuing weekly health bulletins in newspaper form. These are non-technical. The subjects presented are of special interest to the layman; the article released Monday, February 23d, was on the very important topic of trachoma.

Maryland

The State Department of Health, 16 West Saratoga Street, Baltimore, Md., has recently issued a bulletin for mothers on the care of the eyes. This contains information regarding the care of the eyes of the baby, the preschool child, the school child and adult members of the family. It is a brief sheet, couched in very simple language.

Missouri

Sight Saving Week will be held throughout the State May 21–27, under the auspices of the Missouri Commission for the Blind.

Mr. Jacob Lampert, one of the Commissioners, has given a fund that will make it possible to have a lecturer in St. Louis. Dr. Edward Jackson, of Denver, Colorado, has been chosen the lecturer for 1925.

A retiring Commissioner, Mr. Leslie Dana, has given a fund which will be used for a medal to be awarded yearly to the person in the United States or Canada who has done most for the prevention of blindness during the year.

The State will be divided into sections for the celebration of Sight Saving Week. Eye examinations will be arranged; local associations doing preventive work, oculists, and all others interested in saving sight will cooperate to make the work a success.

New York

The University of the State of New York has sent out the following announcement, which will be of interest to all teachers contemplating undertaking to teach sight saving classes:

April 7, 1925

To City, Village and District Superintendents, Normal Schools, Colleges and Universities, of New York State.

Chapter 193 of the laws of 1924 provides for state aid for the employment of teachers of special classes of children who are deaf, blind, crippled or otherwise physically defective.

This chapter provides for a new subdivision of section 1020 of the Education Law, to be known as subdivision 4. This provides as follows:

> "If the board of education of a city or union free school district establishes one or more special classes for the instruction of deaf, blind, crippled or otherwise physically defective children, as provided in this article, and shall employ one or more teachers for the instruction thereof, the Commissioner of Education shall apportion to such city or district, in the same manner as teachers' quotas are apportioned thereto, an amount equal to one-half the salary paid to each of such teachers, but not to exceed one thousand dollars ($1,000) for each teacher so employed. No such apportionment shall be made on account of a teacher so employed unless there shall have been issued to such teacher by the Commissioner of Education a certificate authorizing such teacher to teach such special classes or unless such teacher shall possess the qualifications prescribed by the Commissioner of Education."

For the school year beginning September, 1925, for approval as special class teacher for purposes of apportionment under the provisions of subdivision 4, of section 1020, of the Education Law a teacher must have the following minimum requirements:

A. For the Elementary Grades

1. Hold a diploma from a New York State normal school or its equivalent which course included work in the field of the particular kind of special class supervision and instruction in which it is sought permission to teach.

or

2. Hold a license valid to teach in the elementary grades in this State and have had in addition at least one 6 weeks' course covering not less than 6 semester hours' work in the field of such special class instruction.

or

3. Hold a license valid in the elementary grades in this State and have had not less than 1 year of successful experience as such special class instructor.

B. For the High School Grades

Hold a license valid to teach in the academic grades in this State and have had in addition the special training or experience specified in above numbered paragraphs 1 or 2 or 3.

The required training and experience in teaching a sight conservation class will not be accepted as qualifying to teach a class for the blind, nor will training and experience in teaching a class for the blind be accepted as qualifying to teach a sight conservation class.

Section 277 of the Regents Rules provides:

". . . the President of the University may, in his discretion, issue temporary licenses valid for a period not to exceed one school year, but only in cases in which public convenience absolutely requires it, and then only on the recommendation of the district, village or city superintendent of schools having jurisdiction. A second temporary license shall not be issued to the same individual.

"No temporary license will be granted unless satisfactory evidence is furnished that the candidate is qualified, and sufficient reasons are given why the candidate is not the holder of a regular certificate."

It has been held that under section 277 of the Regents Rules a second temporary license may be granted provided the teacher has done additional professional study approved for the purpose by the Commissioner of Education.

Very truly yours,

James Sullivan,
Assistant Commissioner for Secondary Education.

A survey of the eyes and ears of 8,000 school children of Jamestown, New York, is being conducted by the Health Department of the University of the State of New York. Dr. Emily A. Pratt,

Eye and Ear Specialist of this department, is in charge of the survey. The cooperating agencies are the Educational Department of Jamestown, the New York State Committee for the Prevention of Blindness and the New York State Commission for the Blind. The local eye specialists, the Parent-Teachers' Association and many others are sharing the work of the survey, which, when completed, should prove a valuable study on the eye and ear conditions of school children.

The Twelfth Annual Report of the New York State Commission for the Blind gives an encouraging account of the splendid preventive work done in the eye clinic at Sing Sing Prison. In 1922 the Commission withdrew from official responsibility of this clinic because of provision on the part of the prison authorities for carrying on the work, but the Commission's head nurse has continued to assist the doctors in special examinations and operations. Dr. Conrad Berens, Jr., and Dr. H. Robertson Skeel have continued their services. During the year 840 patients were examined and fifteen operations performed. This brief report is presented in view of the Commission's continued interest in the eye clinics and the contact maintained through the Commission's Head Nurse, Miss Sara Clendinning, whose long experience has made her help a contributing factor in retaining the voluntary service of the ophthalmologists whose interest was secured through the Commission.

BOOKS AND ARTICLES OF INTEREST

School Vision and the Myopic Scholar, James Kerr, M.A., M.D., D.P.H. Published by George Allen & Unwin, Ltd., Ruskin House, 40 Museum Street, W. C. 1, London, England. This admirable book comes from London just as the News Letter is going to press. It will be of interest to all teachers, but especially to sight saving class teachers.

Dr. Kerr has dedicated his book thus: "To the National Committee for the Prevention of Blindness, New York, in recognition of their good work for the conservation of vision, and in grateful acknowledgment of freely given help."

Sight Saving Work in Public Schools, Dr. M. E. Smukler, *Monthly Bulletin of the Department of Public Health of the City of Philadelphia*, March, 1925. (Reprints may be obtained from the Department.) This article was prepared for the purpose of reviewing the results accomplished in sight saving classes, stressing the necessity of the general practitioner's cooperation.

Sight Saving Classes—Their Contribution to the Field of General Education, Harry C. Hartman, *Outlook for the Blind*, March, 1925. Published by the American Foundation for the Blind, 41 Union Square, New York.

"It is the duty," says Mr. Hartman, "of sight saving class administrators to convince the public that conservation is a general problem of education. . . . Every superintendent, supervisor, principal and teacher should have a working knowledge of eye hygiene, in order that the conditions under which the children work may be as favorable as possible. Furthermore, the obtainment of such proper conditions can only be assured if every angle of the problem receives due consideration during the period of building construction."

Sight Saving Classes Conserve Eyesight and Provide an Education at the Same Time, *School Progress*, Dayton, Ohio, December, 1924. Published by the Dayton, Ohio, Public Schools. Gives an account of the methods employed in the Dayton class for teaching children with seriously defective vision.

What Every Teacher Should Know About the Physical Condition of Her Pupils, James Frederick Rogers, M.D. Published by the Bureau of the Interior, Washington, D. C. A brief bulletin, giving very clear and explicit directions for the physical inspection of pupils.

Lighting in Relation to Public Health, Janet Howell Clark. Published by Williams and Wilkins Co. C. E. A. Winslow gives the following comment in *The Survey* of March 15th, 1925:

"Dr. Clark of Johns Hopkins has met a very real need in the literature of sanitary science in preparing this book on illumination. She treats of the methods used in the measurement of illumination, of illumination standards and of their practical application in the lighting of schools, factories and other places. The book is necessarily somewhat technical for the social worker, but anyone connected with problems of industry will be interested in the statistics quoted in regard to the marked increase in efficiency which results from improved lighting, as well as in the chapters on diseases of the eye due to occupational conditions."

Of Interest to Industrial Readers

The Nation's Health of March, 1925, gives the following announcement: The first international meeting for the study of problems in industrial hygiene, arranged under the auspices of the Institute of Hygiene of the University of Geneva, is to be held in Geneva July 18–20, 1925. Progress will be reviewed in the field of industrial lighting under the general subject of industrial lighting

and eyesight. Impure air in factories will occupy another section, and a third will deal comprehensively with the value of fatigue tests.

The Use of Cerium in Eyeglasses, *Safety Engineering*, February, 1925. Published by the Safety Magazine Publishing Company, 119 Nassau Street, New York. A brief summary of the work of the Bureau of Standards in making extensive examinations of glasses for protecting the eye from ultra-violet and infrared radiation.

Making the Mine a Safe Place to Work, R. R. Sayers, M.D., *The Nation's Health*, March 15, 1925. Published by the Modern Hospital Publishing Co., Chicago, Illinois.

"Poor illumination or deficient illumination may cause a disease of the eyes known as nystagmus. So far as we are able to determine this disease does not occur any more frequently among miners in this country than among the general population. This is probably due to the fact that in many mines carbide lights are used or the permissible electric cap lamp, by means of which, the illumination of the lamp is usually, if not always, directed on the work being done by the miners. Furthermore, the miners' eyes are protected from the direct glare of the lamp by the visor of his cap."

Hygiene of the Eye, Dr. William F. Bonner, *National Safety News*, March, 1925. Published by the National Safety Council, 168 North Michigan Avenue, Chicago, Illinois. Deals with the subject in relation to the eyes of industrial workers. The author sums up thus:

1. Securing the best vision obtainable by correct glasses when necessary and preserving vision by providing adequate illumination without glare for all work.
2. Protection from foreign bodies by properly fitted goggles and strict enforcement of their use.
3. Protection against harmful rays by properly tinted lenses.
4. Hygienic methods to protect against poisonous substances used in manufacturing processes which may cause degeneration of the optic nerve.
5. Provision of proper medical facilities for the safe removal of foreign bodies from the eye.

Of Interest to Medical and Other Social Service Readers

The Fight Against Trachoma in the Italian Islands. Bulletin of the Save the Children Fund International Union. Published at 4 rue Massot, Geneva, Switzerland. A brief account of the work, special clinics and the establishment of a holiday camp.

Of Interest to Medical Readers

Eye Disease in Relation to Tuberculosis, *Journal of the American Medical Association*, February 14, 1925. Published by the American Medical Association, 535 North Dearborn Street, Chicago, Illinois.

"Before the Société belge d'ophthalmologie, Hambresin and Bessemans have presented an important communication on the complement-fixation test in the diagnosis of eye affections associated with tuberculosis. They used the Calmette and Massol method and the Besredka antigen prepared by the Pasteur Institute in Paris. They eliminated consistently all patients whose history pointed to any injury due to trauma, syphilis, gonorrhea or a toxin. From their researches it appears that tuberculosis is a frequent cause of eye disease. The complement-fixation test is entirely harmless in comparison with the bad effects of tuberculinization, ophthalmo-reaction and focal reaction, all of which are dangerous. It is much more accurate than cutireaction."

Etiology of Blindness, *Journal of the American Medical Association*, February 14, 1925.

"Frese publishes statistics on the etiology of blindness in 849 young persons. Gonorrhea was the cause in 23 per cent.; injuries in 8.2 per cent. A further 4.6 per cent. might be avoided by better prevention and treatment of diphtheria, smallpox, syphilis and brain affections, making a total of 35.8 per cent. of avoidable causes."

Toxic Blindness: Report of Two Cases, Clarence Porter Jones, M.D., F.A.C.S., *Virginia Medical Monthly*, March, 1925. Published by the Medical Society of Virginia, Richmond, Virginia. The author stresses diseased nasal sinuses and dental sepsis as frequent causes of toxic blindness.

The One Hundred and Fourth Annual Report of the New York Eye and Ear Infirmary, New York, gives very complete statistical tables covering eye cases treated and operations performed during 1924.

Transactions of the Section of Ophthalmology, American Medical Association, 1924, gives many reports and articles of interest; among them are the following:

Report of Committee on Hereditary Blindness, Trans., Section of Ophthalmology, A.M.A., 1924, 300–303.

In reporting its efforts during the last three years for the control of hereditary blindness, the Committee on Hereditary Blindness, of the American Medical Association, recommends that:

"1. Ophthalmologists and other medical men, especially those connected with schools for the blind, interest themselves, either personally or by proxy, in a study of the number and cost of those whose defect is hereditary and as far as possible of their relatives similarly affected.

"2. Teachers of economics and eugenics be requested and assisted to conduct investigations along these lines.

"3. Copies of such data, wherever obtained, whether published or in manuscript form, be sent to the Eugenics Record Office of the Carnegie Institution, Cold Spring Harbor, N. Y., or to the Chairman of this Committee.

"4. All medical men be urged to join, wherever possible, in this crusade against the propagation of hereditary defects, particularly hereditary blindness, especially when an opportunity is offered to reach legislators, lawyers, clergymen, or other teachers. In that way we may confidently hope to effect a gradual lessening of the suffering, sorrow, needless expense, and blindness in this and in every other nation."

Dr. Robert Cartwright Cheney, in a paper on "The Toxemias of Pregnancy from an Ophthalmologic Standpoint," states:

"Furthermore, considered merely in the light of research, it is quite possible that a routine eye examination in large series of carefully grouped and studied cases of toxemia may produce interesting and valuable information." He says further, in the discussion, "Obstetricians are coming more and more to realize the importance of the eye finding."

Following are the resolutions regarding the furnishing of glasses by the ophthalmologist to his patients, and the acceptance of commissions from opticians, passed by the American Ophthalmological Society on June 16, 1924:

"*Resolved*, That we deprecate the selling of glasses by the ophthalmologist to his patients in communities where the services of reliable dispensing opticians are obtainable.

"*Resolved*, That the acceptance of commissions or considerations, either directly or indirectly, by ophthalmologists from opticians and optical houses is absolutely contrary to all our standards of medical ethics and is just as reprehensible as the splitting of fees."

TELESCOPIC LENSES

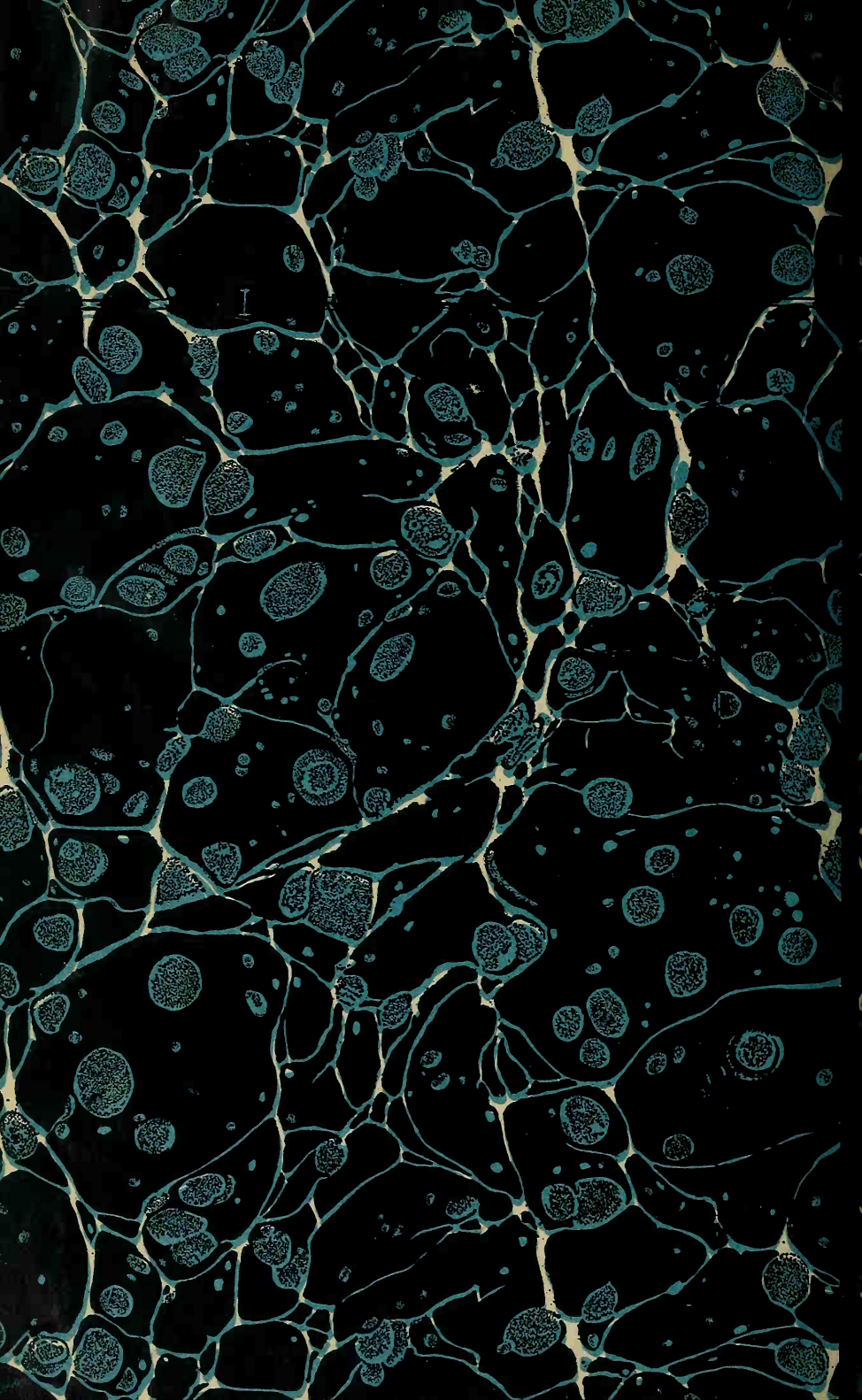
An excellent description of telescopic spectacles and magnifiers as aids to poor vision was presented at the Chicago Meeting of the Section of Ophthalmology of the American Medical Association which met in Chicago June 9 to 13, 1924. This paper appears in the printed volume of the Proceedings and is published by the American Medical Press, Chicago, Illinois. Although prepared primarily for consideration by ophthalmologists, it contains much of interest and value to the layman.

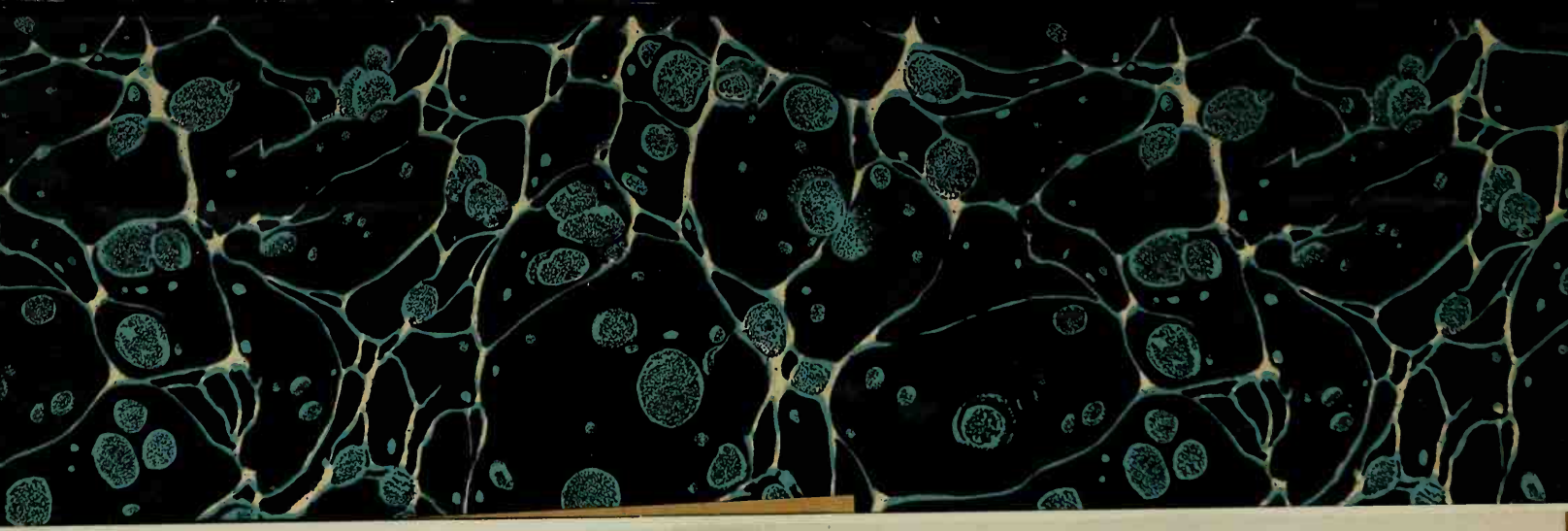
It is to be emphasized from the outset that only a small percentage of the so-called blind or partially sighted may expect relief from telescopic spectacles. They are exceedingly difficult to fit and require great patience and skill on the part of the ophthalmologist and equal patience on the part of the wearer.

In every school for the blind and in every home for the blind there are probably persons with enough sight left to receive great help from telescopic spectacles. There is also probably a small percentage of children in conservation of vision classes who would be enabled to read ordinary print by their use.

The expense involved in fitting telescopic spectacles and furnishing the glasses is large, but will always be justified whenever there is a marked increase in visual efficiency as a result.

The National Committee for the Prevention of Blindness will welcome a description of the results which have been attained by the use of this device.





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